

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	IN NO.	DATE
FEE DETERMINATION	BA		04-17-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	BZ	897	04-30-01
RESPONSE FORMALITY REVIEW	Zm	927	11-08-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
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18			
19			
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21			
22	✓	✓	✓
23	✓	✓	✓
24	✓	✓	✓
25	✓	✓	✓
26	✓	✓	✓
27	✓	✓	✓
28	✓	✓	✓
29	✓	✓	✓
30	✓	✓	✓
31	✓	✓	✓
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42	✓	✓	✓
43	✓	✓	✓
44	✓	✓	✓
45	✓	✓	✓
46	✓	✓	✓
47	✓	✓	✓
48	✓	✓	✓
49	✓	✓	✓
50	✓	✓	✓

Claim	Final	Original	Date
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85	✓	✓	✓
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90	✓	✓	✓
91	✓	✓	✓
92	✓	✓	✓
93	✓	✓	✓
94	✓	✓	✓
95	✓	✓	✓
96	✓	✓	✓
97	✓	✓	✓
98	✓	✓	✓
99	✓	✓	✓
100	✓	✓	✓

Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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Best Available Copy

11/08/01